

Health Status - Children



HEALTH STATUS OF CHILDREN

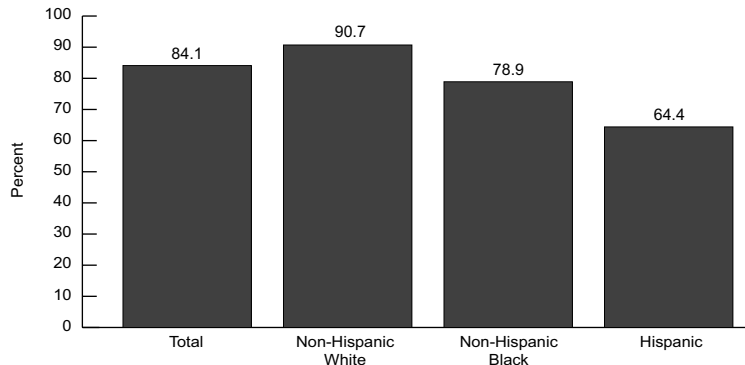
In 2003, 84.1 percent of children were in excellent or very good health, according to parent reports. Males were slightly less likely to be in excellent or very good health than females (83.5 versus 84.7 percent). The percent of children in excellent or very good health decreases with increased age: 86.0 percent of children under age 5 were in excellent or very good health, compared to 83.8 percent of 6- to 11-year-olds and 82.6 percent of 12- to 17-year-olds.

The rate of children in excellent or very good health varies by several other factors, including family income and race and ethnicity. Non-Hispanic White children were the most likely to be in excellent or very good health (90.7 percent) while Hispanic children were the least likely (64.4 percent). Children with family incomes below 100 percent of the Federal poverty level (FPL) were least likely to be reported by parents to be in excellent or very good health (66.8 percent), followed by those with family incomes of 100 to 199 percent of FPL (80.9 percent), and

those with family incomes of 200 to 399 percent of FPL (90.2 percent); children with family incomes of 400 percent of FPL or above were the most likely to be in excellent or very good health (93.8 percent).

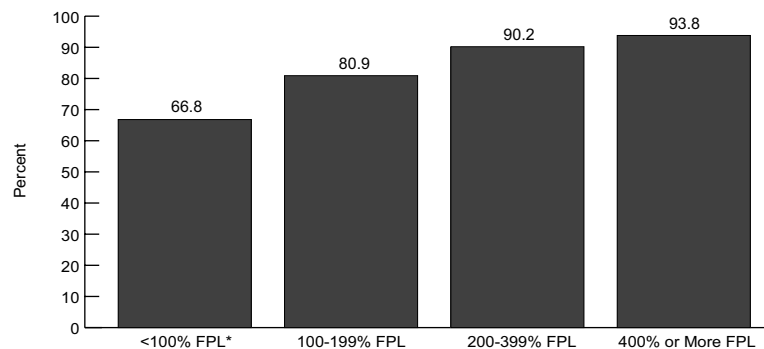
Children Aged 0-17 Years in Excellent or Very Good Health, by Race/Ethnicity: 2003

Source (I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



Children Aged 0-17 Years in Excellent or Very Good Health, by Family Income: 2003

Source (I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



*Federal poverty level, equal to \$18,400 for a family of four in 2003.

ASTHMA

Asthma is a disease in which the airways become blocked or narrowed. It is triggered by allergies or other factors, and symptoms include wheezing, chest tightness, and shortness of breath. In 2003, almost 8 percent of children in the United States were affected by asthma. This includes all children whose parents reported that a doctor ever told them the child had asthma and that the child still has asthma, and children who, in the past year, used asthma medication, had

moderate or severe difficulties combined with an attack, or had been hospitalized for asthma.

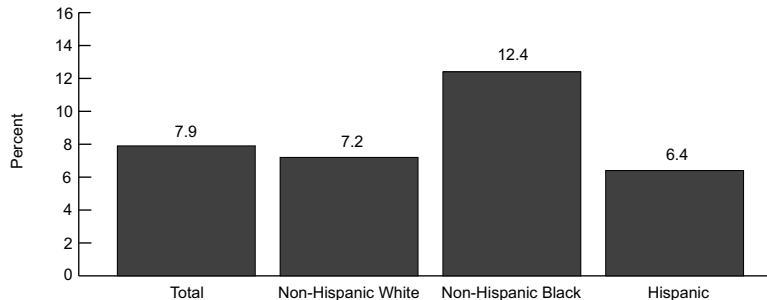
In 2003, males were more likely to be affected by asthma than females (9.2 versus 6.6 percent). A greater proportion of children ages 6 to 11 years and 12 to 17 years were affected by asthma (8.8 and 8.7 percent, respectively) than children from birth to age 5 (6.2 percent). Non-Hispanic Black children were most likely to be affected by asthma, while Hispanic children were least likely to be affected. Children with lower family

incomes were more likely to be affected than children with higher family incomes.

The effects of asthma also vary by insurance status. Children with public insurance were more likely to be affected by asthma than children with private insurance (10.6 versus 7.2 percent); of children with no insurance, 5.0 percent were affected in the ways described above. It is important to note that uninsured children may be less likely to have access to doctors and prescription drugs, which may affect whether parents report that their child has been affected by asthma.

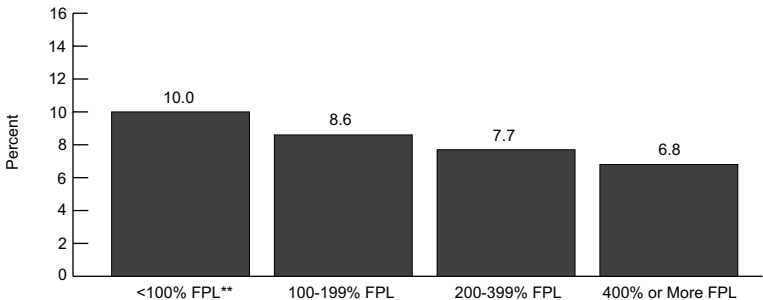
Children Aged 0-17 Years Affected by Asthma,*
by Race/Ethnicity: 2003

Source (I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



Children Aged 0-17 Years Affected by Asthma,* by Family
Income: 2003

Source (I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



*Includes all children whose parents reported that a doctor ever told them the child had asthma and that the child still has asthma, and children who, in the past year, used asthma medication, had moderate or severe difficulties combined with an attack, or had been hospitalized for asthma. **Federal poverty level, equal to \$18,400 for a family of four in 2003.

MENTAL HEALTH

In 2003, almost 10 percent of children in the United States had moderate to severe socio-emotional problems. This includes children whose parents reported that they have moderate to severe difficulties with emotions, concentration, behavior, or getting along with others.

Rates of socio-emotional difficulties vary by a number of factors, including sex, age, race/ethnicity, family income, and insurance type. In 2003, a greater proportion of males under age 18 experienced socio-emotional difficulties than

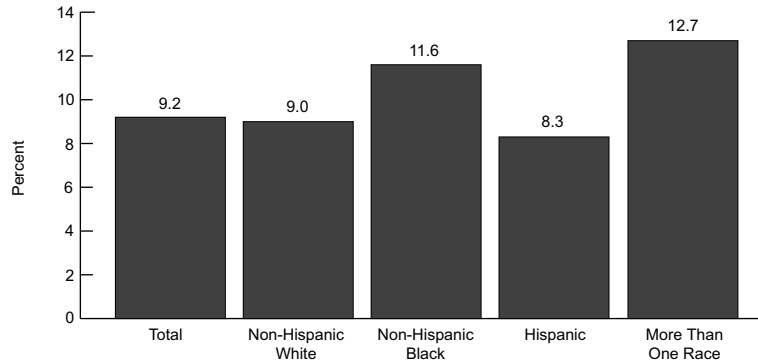
their female counterparts (11.3 versus 6.9 percent). Children of multiple races had the highest rate of socio-emotional problems (12.7 percent) followed by non-Hispanic Black children (11.6 percent), and non-Hispanic White children (9.0 percent); Hispanic children had the lowest rate (8.3 percent).

Older children were more likely to experience socio-emotional difficulties than younger children, with 12- to 17-year-olds experiencing the highest rate (10.9 percent) and 3- to 5-year olds experiencing the lowest rate (4.9 percent). Rates

declined consistently with increased family income: children with family incomes below 100 percent of the poverty level experienced the highest rate (14.0 percent), while children with family incomes at or above 400 percent of the poverty level experienced the lowest rate (6.1 percent). Children with public insurance had a higher rate of socio-emotional problems than children with private insurance (14.9 versus 7.0 percent); they also had a higher rate than children without insurance (8.0 percent).

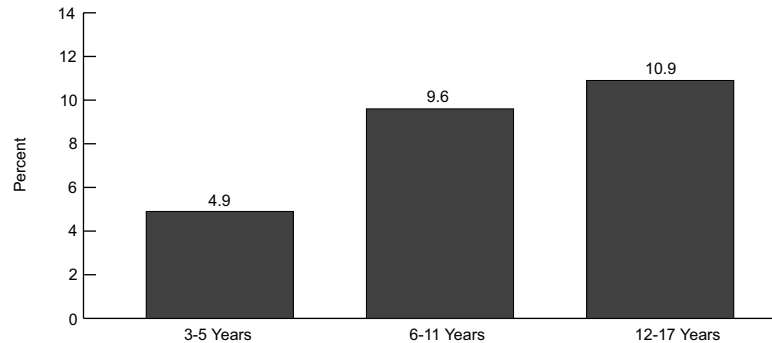
Children Aged 3-17 Years with Socio-Emotional Difficulties,* by Race/Ethnicity: 2003

Source (I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



Children with Socio-Emotional Difficulties,* by Age: 2003

Source (I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health



*Includes all children whose parents said that they have moderate to severe difficulties with emotions, concentration, behavior, or getting along with other people.

CHILD ABUSE AND NEGLECT

State child protective services (CPS) agencies received 2.9 million referrals alleging child abuse or neglect in 2003. Over half of these reports were received from community professionals, while the remainder were received from family, friends, relatives, or neighbors of these children.

In 2003, investigations by State CPS agencies determined that an estimated 906,000 children were victims of abuse or neglect, equivalent to a rate of 12.4 per 1,000 children under 18 years of age. Approximately 63 percent of all victims

suffered neglect or medical neglect, 19 percent physical abuse, 10 percent sexual abuse, 5 percent psychological maltreatment, and 17 percent other forms of maltreatment. Some children suffered multiple types of maltreatment.

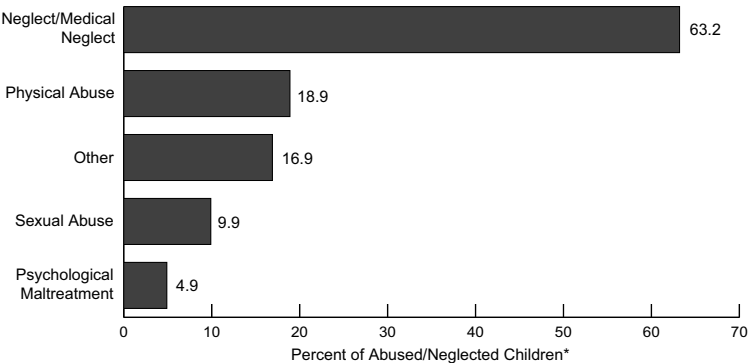
Victimization was highest among the youngest children. In 2003, the rate of victimization among children from birth to age 3 was 16.4 per 1,000 children of the same age; the rates declined steadily as age increased. Among the estimated 1,500 children who died of abuse and neglect, children under 1 year of age accounted for nearly

44 percent, and children under 7 years accounted for 90 percent. Of the child fatalities that occurred in 2003, 78 percent were caused by a parent.

The data were obtained from the National Child Abuse and Neglect Data System, the primary source of National information on abused and neglected children known to State CPS agencies.

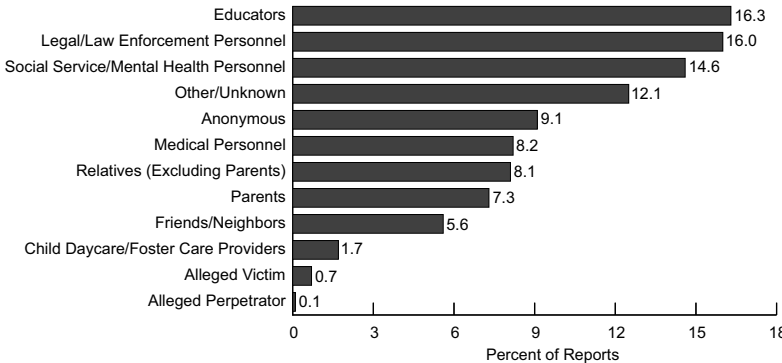
Child Abuse and Neglect Among Children Under Age 18, by Type of Maltreatment: 2003

Source (II.4): Administration on Children, Youth, and Families, National Child Abuse and Neglect Data System



Sources of Maltreatment Reports: 2003

Source (II.4): Administration on Children, Youth, and Families, National Child Abuse and Neglect Data System



PEDIATRIC AIDS

At the end of 2003, 9,419 cases of Acquired Immunodeficiency Syndrome (AIDS) in children younger than 13 had been reported in the United States since the beginning of the epidemic. Pediatric AIDS cases represented just over one percent of all cases ever reported.

In 2003, an estimated 59 new AIDS cases were diagnosed among children, almost 100 percent of which were transmitted before or during birth (perinatal transmission). Since 1993, the number of new cases of pediatric AIDS due to

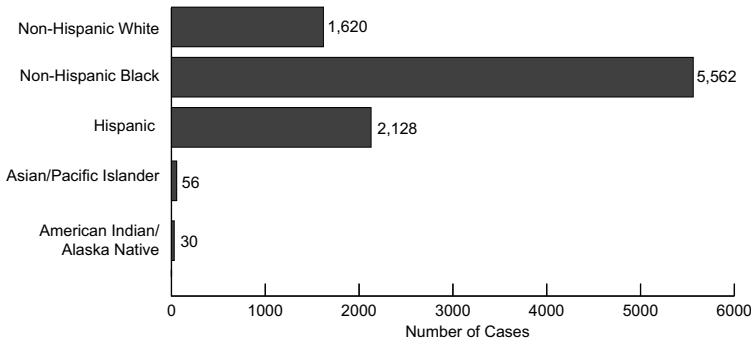
perinatal transmission has declined substantially, and from 1999 to 2003 the number of new cases among children under 13 years of age, regardless of transmission method, decreased 68 percent. A major factor in this decline is the increasing use of treatment before, during, and after pregnancy to reduce perinatal transmission of the Human Immunodeficiency Virus (HIV), the virus that causes AIDS. In 1994, the U.S. Public Health Service recommended this treatment for all HIV-positive pregnant women, and in 1995 routine HIV counseling and voluntary testing for all

pregnant women was recommended. It is expected that the perinatal transmission rate will continue to decline with increased use of aggressive treatments and obstetric procedures, such as elective cesarean section.

Racial and ethnic minorities are disproportionately represented among pediatric AIDS cases. As of 2003, the number of pediatric AIDS cases ever reported among non-Hispanic White children was less than one-third the number among non-Hispanic Black children, and 25 percent less than that among Hispanic children.

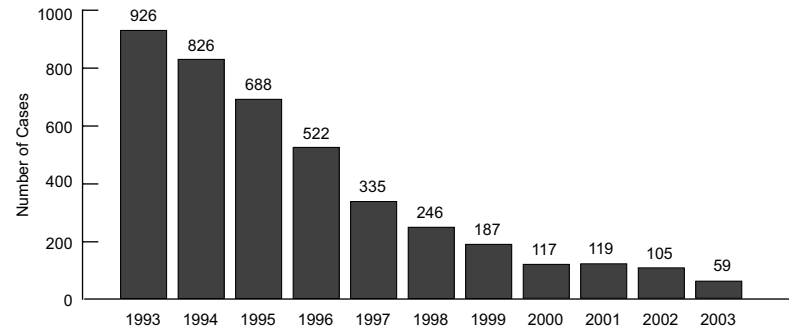
AIDS Cases Among Children Under Age 13, by Race/Ethnicity: Through 2003*

Source (II.5): Centers for Disease Control and Prevention, HIV/AIDS Surveillance System



Estimated Numbers of AIDS Cases in Children Under Age 13, by Year of Diagnosis: 1993-2003

Source (II.5): Centers for Disease Control and Prevention, HIV/AIDS Surveillance System



*Includes children with a diagnosis of AIDS, from the beginning of the epidemic through 2003.



VACCINE-PREVENTABLE DISEASES

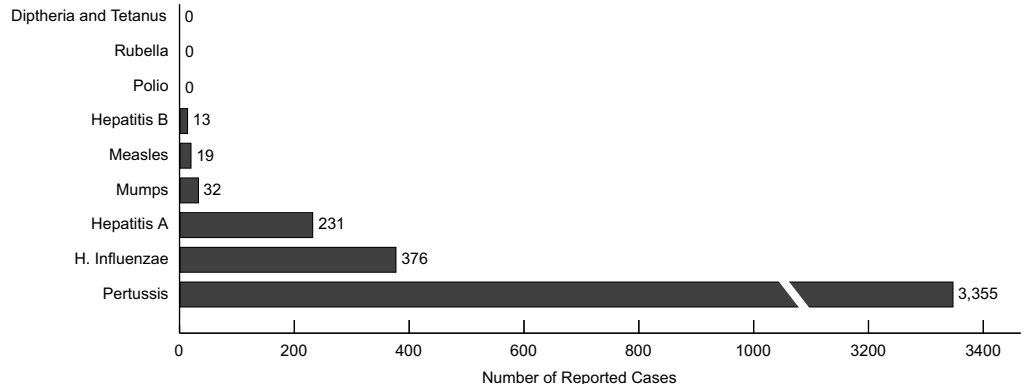
The number of reported cases of vaccine-preventable diseases has decreased steadily over the past decade. The number of cases of *H. Influenzae* among children under 5 years of age increased from 2002 to 2003, but the number of cases of measles, mumps, pertussis, and Hepatitis A and B decreased over the same period. It is important to note that since most Hepatitis B infections among infants and young children are asymptomatic, the reported number of cases likely underestimates the incidence of Hepatitis B in these age groups. In 2003, the highest number of cases of pertussis (3,700) was reported since 1964; however, the number of cases among children under 5 decreased by almost 10 percent. Of all pertussis cases, 17 percent were among infants under 6 months of age who are too young to have received the full schedule of pertussis vaccine.

Although much progress has been made in reducing the number of reported cases of vaccine-preventable diseases, several of these diseases are still common. The number of cases of pertussis, Hepatitis A, and *H. Influenzae* remain substantial and indicate a continuing need to promote immunization efforts. Since childhood

vaccination for Hepatitis A was recommended in 1996 for children living in high-risk areas, the number of cases has decreased; in 2003, it reached the lowest rate ever recorded (2.7 cases per 100,000). Rates of Hepatitis A have shown the greatest decline among children in States where routine vaccination was recommended, suggesting that immunization policies are having a positive impact on the incidence of the disease.

Vaccine-Preventable Diseases Among Children Under Age 5: 2003

Source (II.6): Centers for Disease Control and Prevention



HOSPITALIZATION

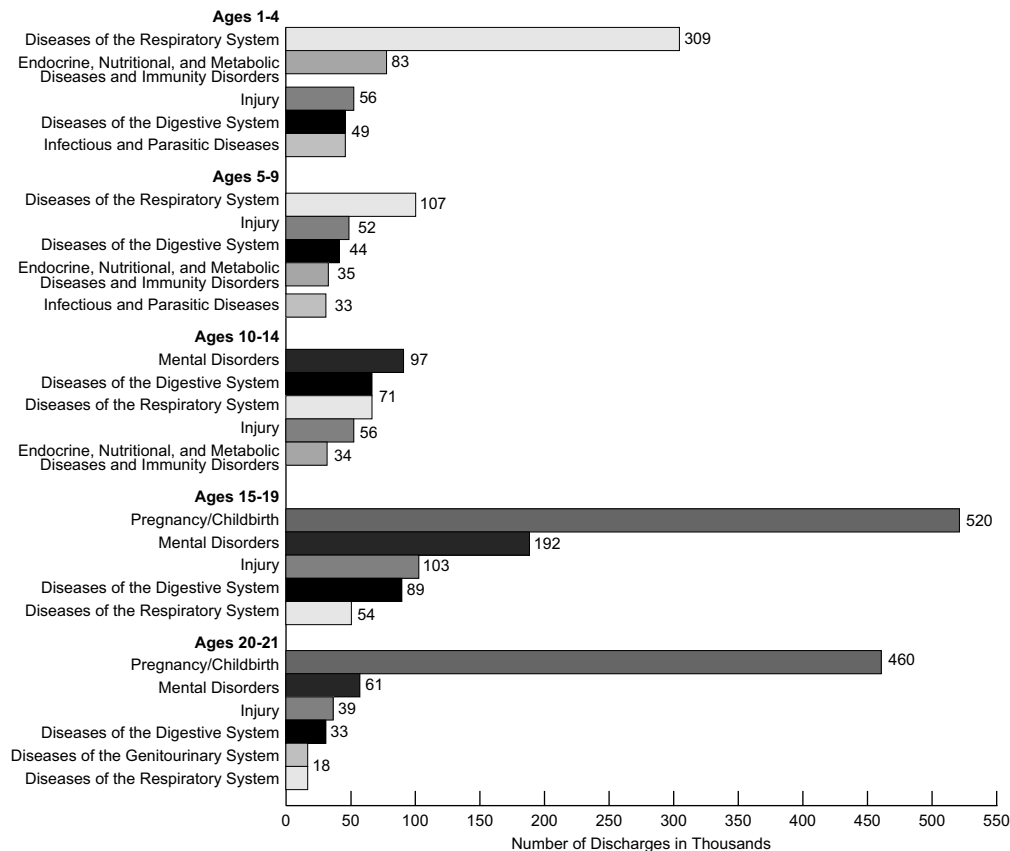
In 2003, there were 3.7 million hospital discharges among children ages 1 to 21, or 4.4 discharges per 100 children. This represents little change from 2002. Hospital discharge rates generally decrease until about age 7 and increase during later adolescence.

While injuries are the leading cause of death among children older than 1 year, they accounted for only 9 percent of hospital discharges among children 1 to 14 years old in 2003. Diseases of the respiratory system were the major cause of hospitalization for children 1 to 9 years of age, accounting for 34 percent of discharges. Pregnancy and childbirth accounted for 67 percent of discharges of young women ages 15 to 21. Mental disorders were the second leading cause of hospitalization for adolescents.

Overall, there has been a significant decrease in hospital discharge rates among children over the past 20 years. From 1985 to 2003, there was a 33 percent decrease in discharge rates for children ages 1 to 14 years. During this period, hospital discharge rates for diseases of the respiratory system declined 35 percent for children in this age group.

Major Causes of Hospitalization, by Age: 2003

Source (II.7): Centers for Disease Control and Prevention, National Center for Health Statistics, National Hospital Discharge Survey

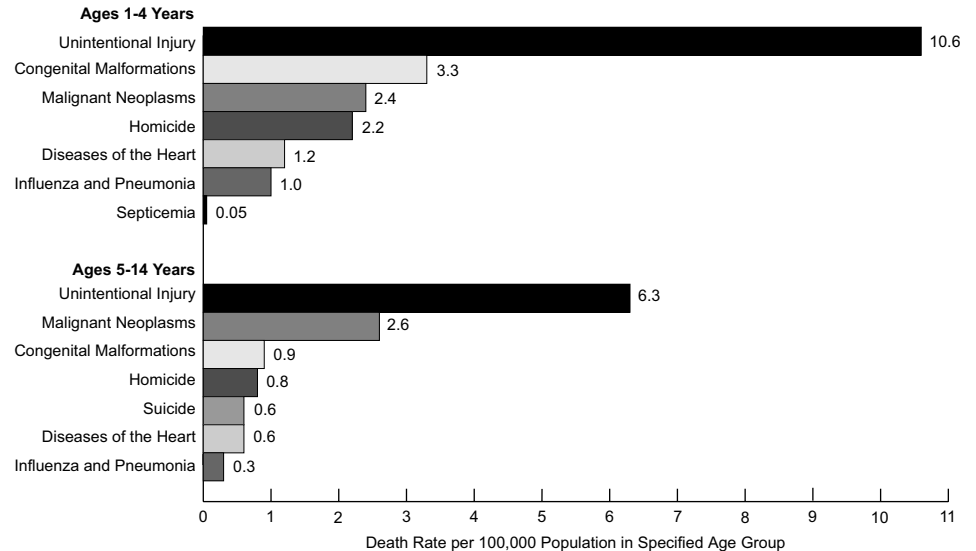


CHILD MORTALITY

In 2003, 11,841 children between the ages of 1 and 14 years died of various causes; this was 190 fewer than the previous year. The overall death rate among 1- to 4-year-olds was 31.1 per 100,000, and the rate among 5- to 14-year-olds was 16.9 per 100,000. The leading cause of death among 1- to 4-year-olds continues to be unintentional injury, which accounted for 34.2 percent of all deaths in this age group in 2003. The next most common cause of death was congenital malformations (birth defects), followed by malignant neoplasms (cancer), homicide, and diseases of the heart. Unintentional injury was also the leading cause of death among 5- to 14-year-olds in 2003, accounting for 37.0 percent of deaths among this age group. This was followed by malignant neoplasms, congenital malformations, homicide, suicide, and diseases of the heart.

Leading Causes of Death Among Children Ages 1-14: 2003

Source (II.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System



CHILDHOOD DEATHS DUE TO INJURY

In 2003, unintentional injuries caused the deaths of 1,679 children aged 1-4 years and 2,562 children aged 5-14 years. In 2003, motor vehicle crashes, drowning, and fires and burns were the most common causes of unintentional injury death among children aged 1-4 years. Motor vehicle crashes were the most common cause of unintentional injury death among children aged 5-14 years, followed by deaths due to drowning, suffocation, and fires and burns.

In addition, 342 children aged 1-4 years were the victims of homicide in 2003, and 565 children aged 5-14 years were the victims of homicide or suicide (data not shown).

Deaths Due to Unintentional Injury Among Children Ages 1-14: 2003

Source (II.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

